IN THE SPECIFICATION:

Please amend the specification as follows.

Please amend the paragraph under "Related Applications" as indicated below:

This is a continuation of application no. 09/776,850, filed February 6, 2001, now U.S. Patent 6,645,241, which is a continuation of application no. 08/707,820, filed September 4, 1996, now U.S. Patent 6,193,746, which is a continuation of application no. 08/393,950, filed February 22, 1995, now abandoned, which is a continuation of application no. 08/087,520, filed on July 2, 1993, now abandoned.

Please amend the paragraph at page 16, lines 1-21 as follows:

The endoprosthesis 40 in the embodiment illustrated in Figure 7 comprises a lining 42 and 43 in the form of a double walled sleeve. The outer lining. component 43 of the in-place and expanded stent rests against the inner surface 46 of the blood vessel. Inner lining component 42 rests against the stent. Between the two walls is enough room to accommodate medications, which can penetrate to inner surface 46 through openings ~~18~~ 48 that extend through outer lining component ~~13~~ 43. Inner lining component ~~12~~ 42 can also have (unillustrated) openings, even more or less than outer lining component ~~13~~ 43. A flexible tube 47 can extend through the space between lining components 42 and 43 more or less coaxial with the axial extent of endoprosthesis 40 and along the inner surface of the blood vessel, allowing a continuous supply of medication.

Please amend the paragraph at page 3, line 18 as follows:

A vascular prosthesis comprising a porous flexible tube of plastic with an elastomeric coating bonded to its outer surface and with both components medicated is ~~admittedly~~ known from German OS 2 941 281. This prosthesis, however, can expand to only a limited extend, and the expanding coating has a considerable range of elasticity. A considerable force of restoration is accordingly exerted on the stent in the expanded state and can undesirably reduce the expansion situation.

Please amend the paragraph at page 5, line 24 as follows:

An implant is ~~admittedly~~ known from German OS 3 503 126 with a medicated collagen coating on the surface of a tubular support or stent. This coating, however, expands to only a

limited extent, and the medication is released non-linearly. The lining in another advantageous advanced version of the present invention is applied to the hollow structure or stent that supports the prosthesis once it has expanded to approximately half its final size. This ensures that the prosthesis will be uniformly coated even at maximal expansion.

Please amend the paragraph at page 7, line 24 as follows:

Stents coated with polymer and impregnated with medication are admittedly already ~~.known~~ known, for example from ~~R. C~~ R. C. Oppenheim et al, Proc. Int. Symp. Contr. Rel. Bioact. Mat. 15 (1988), pages 52 to 55. These coatings, however, which are applied by spraying a dispersion of acrylic onto the stent, are not biodegradable, and there are no means of expanding the cross-section of the prosthesis.

Please amend the paragraph at page 10, line 6 as follows:

The outer layer of the lining in another advanced version of the invention can be impregnated with cytostatics to keep tumorous stenoses open. The inner layer can be impregnated with ~~Theologically~~ rheologically beneficial substances in order for example to promote the flow of bile through a stent in the bile tract. This feature is particularly significant because for example bile-tract stenoses are frequently associated with secondary infections of the tracts that lead to lumps adhering to the stent and obstructing the lumen.

Please amend the paragraph at page 14, line 25 as follows:

It can also be practical to impregnate only the ends of the type of prosthesis illustrated in Figure 4 in order to ensure release of only a low dose and avoid systemic action. The endoprosthesis in accordance with the invention can for example concern a sterile metal stent. The stent is 4 cm long with an inside diameter of 4.0 mm. It is soaked in aseptic conditions in a solution of 4.00 g of poly-D,Llactide (which has an inherent viscosity of 0.3), 0.35 g of triacetin, and 270 g of acetone. It is then allowed to dry (for 5 days at room temperature and for 16 days at a low pressure of 20 ~~torrs~~ torr) and at 40°C at low pressure (4 days). The polymer coating (24 mg/cm) will now have a phase transition temperature of 25 + 2°C. The polymeric solution can, however, also have 0.40 g of heparin suspended in it. The polymer coating will in this event comprise 2.0 mg/cm of heparin. The polymer coatings finally can be stored at 37 °C in an isotonic phosphate buffer with a pH of 7.4 at 37°C. In a test of this approach the polymer began to lose mass in 18 days and yielded a subsequent half time of 12 days. The molar mass-reduction half time was 10 days.